

L15000125286

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

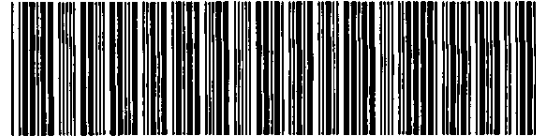
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TREASURY
12/21/16

JAN 06 2017

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 22, 2016

LAURA LIPTON
FLORIDA CLEAN MASTER L.L.C
601 N LOIS AVENUE
TAMPA, FL 33609

SUBJECT: FLORIDA CLEAN MASTER, LLC
Ref. Number: L15000125286

We have received your document for FLORIDA CLEAN MASTER, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 716A00027208

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 DEC 21 AM 10:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Florida Clean Master LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Laura Lipton
Name of Person

Florida Clean Master L.L.C.
Firm/Company

601 N Lois Ave.
Address

Tampa / FL 33609
City/State and Zip Code

floridacleanmaster@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laura Lipton at (813) 270-5225
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
SECRETARY OF STATE
TALLAHASSEE, FL 32301
16 DEC 21 AM 10:25

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Florida Clean Master L.L.C.
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 07/22/2015 and assigned Florida document number L15000125286

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Laura Lipton

New Registered Office Address:

601 N Lois Ave.

Enter Florida street address

Tampa

City

Florida

33609

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Laura Lipton
If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MNG	Laura Lipton		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		601 N Lois Ave, 33609	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

10 DEC 21 AM 10:23
ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

We are amending Kfir Saban
and Wilbeth Rodriguez from
the company completely.

DEC 21 AM 10:25
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 10/10/16 BY 60322
SP1/STP/STP/STP/STP/STP

E. Effective date, if other than the date of filing: 12/06/16 (optional)

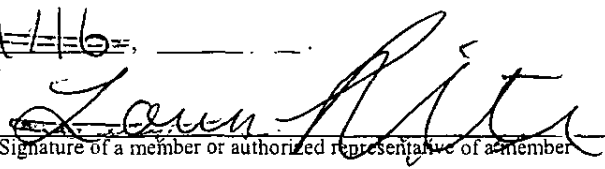
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated

01/04/16


Signature of a member or authorized representative of a member

Laura Lipton
Typed or printed name of signer